

born, file a certificate for each child and fill Items 4 and 5 carefully.
illbirth file both birth and death certificate.

1 PLACE OF BIRTH

STATE OF TEXAS

County of

Precinct No.

TEXAS STATE DEPARTMENT OF HEALTH
BUREAU OF VITAL STATISTICS
STANDARD CERTIFICATE OF BIRTH

17434

Register No.

2 FULL NAME OF CHILD

3. Sex

If plural
births

4. Twin, triplet, or other

5. Number, in order of birth

6. Premature

Full term

7. Legiti-
mate?

8. Date of
birth

If child is not yet named, make
supplemental report, as directed

9. Full
name

FATHER

18. Full
maiden
name

MOTHER

10. Residence
(usual place of abode)
(If nonresident, give place and date)

19. Residence

11. Color
or race

13. Birthplace
(city or place)
(State or country)

14. Trade, profession, or particular
kind of work done, as spinner,
sawyer, bookkeeper, etc.

15. Industry or business in which
work was done, as silk mill,
sawmill, bank, etc.

16. Date (month and year) last
engaged in this work

17. Total time (years)
spent in this work

OCCUPATION

23. Trade, profession, or particular kind
of work done, as housekeeper,
typist, nurse, clerk, etc.

24. Industry or business in which
work was done, as own home,
lawyer's office, silk mill, etc.

25. Date (month and year) last
engaged in this work

26. Total time (years)
spent in this work

27. Number of children of this mother
(At time of this birth and including this child)

(a) Born alive and now living

(b) Born alive but now dead

(c) Stillborn

Births - Use the stamped number
in the **Certificate Number** field.